

Commercial Drivers License 555 Wright Way, Carson City 810 E. Gregg St, Sparks, NV 89431 4110 Donovan Way, N Las Vegas, NV 89030 3505 Construction Way, Winnemucca, NV 89445 3920 E. Idaho St, Elko, NV 89801 178 N. Avenue F, Ely, NV 89301

Non-Commercial Class A/B Third Party Certifier Application

NAC 483.186 to 483.197

Physical Address: Street City State Zip	Name:			
Driver's License Number: CDL Class: _ A _ B Endorsements: _ R _ J Social Security No Date of Birth Sex Height Weight Hair Eyes I certify under penalty of perjury that the information on this application is true and correct. authorize the Department of Motor Vehicles to conduct any background investigation necessary to evaluate my driving, employment or credit history. I have read and will comply with the regulations and requirements for certification as a NCDL A/B Third Party Certifier. Signature: Date: Part II – To be completed by Approved Certifying Agency/Department Agency/Department: Address:	Physical Address:	troat	City	State 7in
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Address: Street City State Zip	•			
	above has demonstra understand any mis	ited ability to safel sstatement of fac	y operate a Class A or cts may cause cance	r B emergency vehicle.
I certify all statements made on this application are true. I attest the certifier (driver) named above has demonstrated ability to safely operate a Class A or B emergency vehicle. In understand any misstatement of facts may cause cancellation of my, or the agency/department's authority to certify driving ability.	Name:		Title:	
above has demonstrated ability to safely operate a Class A or B emergency vehicle. In understand any misstatement of facts may cause cancellation of my, or the	Signature:		Date:	